

CROWN POINT CIVIC CENTER

General Information

The Crown Point Civic Center is available for use by Non-Profit Crown Point Organizations. Use is not guaranteed until a confirmation form has been received. The center is heavily used and groups should contact the Parks Office before filling out the reservation request form.

Keys may be obtained from the Crown Point Police Department (124 North East St.-North and East of the Civic Center). The group representative will be required to leave a valid form of identification at the time the key is picked up.

The key will unlock the doors on the East side of the building and the first set of doors as you head West on the North side of the building from the corner.

Groups must turn off all of the lights, clean up any mess made, take out their garbage and lock all of the doors prior to leaving the Civic Center. Garbage may be thrown away behind City Hall in the third dumpster on your right. Fees will be assessed to groups not fulfilling these tasks before they leave as follows: first time - \$25, second time - \$50, third time – loss of facility use.

The City of Crown Point has the right to change reservations set for groups with a months notice provided to the organization.

Groups are responsible for setting up and taking down any chairs/tables needed for their event.

Amenities

Tables and chairs
Kitchen stove, refrigerator, microwave
Television/VCR
Heating/Air Conditioning

Emergency contact numbers

Weekdays between the hours of 8:30 AM-4:30 PM

Crown Point Parks & Recreation (661-2271)

Weekdays after 4:30 PM and Weekends

Crown Point Police Department (663-2131)

Maximum Capacity

Small Meeting Room

Chairs Only – 102 people

Tables and chairs – 48 people

Large Meeting Room

Chairs Only – 160 people

Tables and chairs – 89 people

CIVIC CENTER RESERVATION FORM

Please fill out this form completely and return to:
Crown Point Parks & Recreation
1313 E. North St., Crown Point, IN 46307

NAME OF ORGANIZATION: _____

CONTACT NAME: _____ TELEPHONE: _____

ADDRESS: _____

Name of event/program: _____

Dates you wish to reserve: _____

Time of event/program (i.e. 5-7 PM): _____

Purpose for event: _____

Age group of those attending event/program: _____

If children attend event/program will there be sufficient parents/chaperones present to care for and oversee each child? _____

Number of persons expected to attend event/program: _____

Is your organization: Not-for-profit (Must provide proof)? _____ For Profit? _____

Percentage of organization that are Crown Point residents: _____

Special equipment or needs for event/program? _____

The undersigned does hereby certify that the above and foregoing representations are true in fact and that the undersigned is duly authorized and responsible to represent the interests of the group or organization making this request. The undersigned further acknowledges that no alcoholic beverages of any type will be sold, possessed, or consumed upon city property at any time and that the undersigned and/or the organization making this request shall be responsible for and hold the City of Crown Point and its officers, agents, servants, and employees harmless from any and all claims for any loss, injury, or any other liability arising from the use of the Civic Center by the above named group or organization.

Print Name: _____ Title: _____

Signature: _____ Date: _____

(PLEASE ATTACH A COPY OF YOUR LIABILITY INSURANCE OR A SIGNED WAIVER)

CROWN POINT CIVIC CENTER
WAIVER OF ALL LIABILITY

Whereas; certain citizens of the City of Crown Point, and other individuals, intend to take part in voluntary group participation, in voluntary group entertainment and/or meetings; and

Whereas; said individuals have announced their intention to conduct said entertainment and/or meetings at the Crown Point Civic Center located at 101 S. East St., Crown Point, Indiana; and

Whereas; the City of Crown Point does not sanction nor in any manner is involved in the organization, instruction or teaching of said entertainment and/or meeting program will be safe to the health or welfare of the individual participants.

THE UNDERSIGNED, does hereby acknowledge that their participation in said entertainment and/or meeting program, is strictly a voluntary action on their part; that in the case of the said entertainment program that may pose a threat to their personal health; and, that the undersigned will hold the City of Crown Point harmless from any and all claims, of whatsoever type and nature, arising from any injuries or other harm suffered from participation in said entertainment and/or meeting program or from their use of any of the facilities at the Crown Point Civic Center. The undersigned further releases and indemnifies the City of Crown Point from any and all claims from participation in said program and further represents that said release from liability shall also bind their heirs, survivors, beneficiaries, and representatives.

Date: _____

Name of Group Representative: _____

Signature of Group Representative: _____